

# Boone County Health Department

116 W Washington St Lebanon IN 46052

www.boonecounty.in.gov

Environmental Health

765-483-4458

765-483-5243 Fax



Nursing & Vital Records

765-482-3942

765-483-4450 Fax

**Public Health**  
Prevent. Promote. Protect.

## Septic Installer License Application

To register your company with the Boone County Health Department please include \$25 and this application (please make checks out to the Boone County Health Department).

COMPANY'S NAME \_\_\_\_\_

Owner's Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Work/Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Fax \_\_\_\_\_ Email \_\_\_\_\_

Contact Person's Name \_\_\_\_\_

(This will be the name put on the Boone County septic installers list)

Contact Person's Number \_\_\_\_\_ Circle One: Work/Home or Cell

(This will be the number put on the Boone County septic installers list)

Please list other employees and their contact number in case of your absence:

Person's Name

Contact Number

1) \_\_\_\_\_

\_\_\_\_\_

2) \_\_\_\_\_

\_\_\_\_\_

3) \_\_\_\_\_

\_\_\_\_\_

I have read the Indiana State Department of Health Rule 410 IAC 6-8.2 Residential Sewage Disposal Systems and the Boone County On-site Sewage Disposal Ordinance and understand that any violation of the codes and/or requirements may result in the revocation of my license in Boone County.

Sign \_\_\_\_\_

Date \_\_\_\_\_